

IFCW

PTO/SB/36 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U. S. DEPARTMENT OF COMMERCE

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**RESCISSON OF PREVIOUS NONPUBLICATION
REQUEST
(35 U.S.C. 122(b)(2)(B)(ii))
AND, IF APPLICABLE,
NOTICE OF FOREIGN FILING
(35 U.S.C. 122(b)(2)(B)(iii))**

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Alexandria, VA 22313-1450
FAX: (703) 305-8568

| | |
|----------------------|-----------------------------------|
| Application Number | 101691,399 |
| Filing Date | 10/22/2003 |
| First Named Inventor | COOK |
| Title | Methods of Making Laryngeal Masks |
| Atty Docket Number | COOK 8713C3 |
| Art Unit | 3761 |
| Examiner | |

A request that the above-identified application not be published under 35 U.S.C. 122(b) (nonpublication request) was included with the above-identified application on filing pursuant to 35 U.S.C. 122(b)(2)(B)(i).
I hereby rescind the previous nonpublication request.

If a notice of foreign or international filing is or will be required by 35 U.S.C. 122(b)(2)(B)(iii) and 37 CFR 1.213(c), I hereby provide such notice. This notice is being provided no later than forty-five (45) days after the date of such foreign or international filing.

If a notice of subsequent foreign or international filing required by 35 U.S.C. 122(b)(2)(B)(iii) and 37 CFR 1.213(c) was not filed within forty-five (45) days after the date of filing of the foreign or international application, the application is ABANDONED, and a petition to revive under 37 CFR 1.137(b) is required. See 37 CFR 1.137(f).

Ahaji K. Amos

Signature

10/15/2004

Date

Ahaji K. Amos

Typed or printed name

46,831

Registration Number, if applicable

314-494-9571

Telephone Number

This request must be signed in compliance with 37 CFR 1.33(b).

If information or assistance is needed in completing this form, please contact the Pre-Grant Publication Division at (703)605-4283 or by e-mail at PGPub@USPTO.gov.

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Signature

Ahaji Amos

Name (Print/Type)

Ahaji K. Amos

Date

10/15/2004

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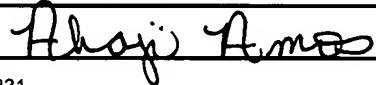
(to be used for all correspondence after initial filing)

| | | |
|--|----------------------|--------------|
| Total Number of Pages in This Submission | Application Number | 10/691,399 |
| | Filing Date | 10/22/2003 |
| | First Named Inventor | COOK |
| | Art Unit | 3761 |
| | Examiner Name | |
| Attorney Docket Number | | COOK 8713 C3 |

ENCLOSURES (Check all that apply)

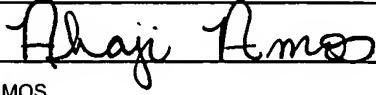
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| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): POSTCARD, RESCISSION OF NONPUBLICATION REQUEST |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|---|----------|-------|
| Firm Name | AHAJI AMOS, 46,831 | | |
| Signature |  | | |
| Printed name | AHAJI AMOS, 46,831 | | |
| Date | OCTOBER 5, 2004 | Reg. No. | 46831 |

CERTIFICATE OF TRANSMISSION/MAILING

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| | | | |
|-----------------------|---|------|-----------------|
| Signature |  | | |
| Typed or printed name | AHAJI AMOS | Date | OCTOBER 5, 2004 |

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PTO/SB/82 (08-04)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

| | |
|------------------------|--------------|
| Application Number | 10/691,389 |
| Filing Date | 10/22/2003 |
| First Named Inventor | COOK |
| Art Unit | 3761 |
| Examiner Name | |
| Attorney Docket Number | COOK 8713 C3 |

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number:

OR

| | | | |
|---|-------------------------|-------|--------------|
| <input checked="" type="checkbox"/> Firm or Individual Name | AHAJI AMOS | | |
| Address | 3810 RITA ELLIOTT COURT | | |
| City | MISSOURI CITY | State | TEXAS |
| Country | USA | | |
| Telephone | 314-484-9571 | Fax | 281-778-6798 |

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|----------------|-----------|--------------|
| Signature | | | |
| Name | Daniel J. Cook | | |
| Date | 10/15/04 | Telephone | 314-644-4262 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

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PTO/SB/01 (09-04)

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and
CORRESPONDENCE ADDRESS
INDICATION FORM**

| | |
|------------------------|-----------------------------------|
| Application Number | 10/691,399 |
| Filing Date | 10/22/2003 |
| First Named Inventor | COOK |
| Title | METHODS OF MAKING LARYNGEAL MASKS |
| Art Unit | 3761 |
| Examiner Name | |
| Attorney Docket Number | COOK 8713 C3 |

I hereby appoint:

Practitioners associated with the Customer Number:

OR

Practitioner(s) named below:

| Name | Registration Number |
|------------|---------------------|
| AHAJI AMOS | 46,831 |
| | |
| | |
| | |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:

OR

The address associated with Customer Number:

Firm or Individual Name: AHAJI AMOS

Address: 3810 RITA ELLIOTT COURT

City: MISSOURI CITY

State: TEXAS

Zip: 77459

Country: USA

Telephone: 314-494-9571

Fax: 281-778-6700

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-------------------|-----------------------|-----------|--------------|
| Signature | <i>Daniel J. Cook</i> | Date | 10/4/04 |
| Name | Daniel J. Cook | Telephone | 314-494-9571 |
| Title and Company | President Cooksys LLC | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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